## BEST AVAILABLE COPY

09	1903.	526
pplication o	r Docket Nu	nber

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number
YOUB 300/FM/9, 2

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY			
TOTAL CLAIMS		9					RATE	FEE	1	RATE	FEE	
FOR			NUMBER	FILED	NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			9 mi	nus 20=	•			X\$ 9=	1	OR	X\$18=	
INDEPENDENT CLAIMS			2 m	inus 3 =	•	ŀ		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	1	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column					olumn 2	ļ	TOTAL	300	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							10	EMALL	NTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 9	Minus	<	<u>?</u>	= 0		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	PENDENT	SCI AIM	= ()		X40=		OR	X80=	
	FINOT FREDE	NIATION OF WA	OCH EL DC	FENDEN	CLAIM		' [	+135=		OR	+270=	
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	•	Minus	••		=	П	X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MI	Minus '	1***	CL AIA	=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF MI	JETIPLE DE	PENUEN	CLAIM		, [	+135=		OR	+270=	
(0)							L	TOTAL		OR	TOTAL ADDIT, FEE	
n La		(Column 1)		(Colui	mn 2)	(Column 3)		IDDN. FEE N		•	ADDI I. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF M	Minus	DENIDENI	CL AIM	=		X40=		OR	X80=	
-	FINST PRESE	NIAHON OF MI	OLITE UE	FENDEN	CLAIM	<b></b>	¹	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OB I	TOTAL		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												